

RESEARCH UPDATE
Dave Storms, CFA
dave@stonegateinc.com

214-987-4121

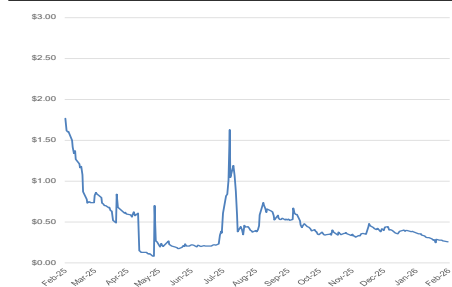
Market Statistics in USD

Price	\$ 0.26
52 week Range	\$0.08 - \$1.79
Daily Vol (3-mo. average)	13,769,892
Market Cap (M)	\$ 93.2
Enterprise Value (M)	\$ 24.4
Shares Outstanding: (M)	358.3
Float (M)	314.3
Public Ownership	84.5%
Institutional Ownership	2.8%

Financial Summary in USD

Cash (M)	\$ 68.9
Cash/Share	\$ 0.19
Debt (M)	\$ 0.2
Equity (M)	\$ 73.4
Equity/Share	\$ 0.20

FYE: Jun	2025	2026E	2027E
<i>(all figures in M, expect per share information)</i>			
EBITDA	\$ (46.9)	\$ (24.9)	\$ 20.0
Net Income	\$ (46.9)	\$ (24.9)	\$ 20.0
EPS	\$ (1.37)	\$ (0.07)	\$ 0.06
EV/R&D	1.4x	6.7x	10.8x
EV/EBITDA	-0.3x	-2.0x	2.5x
P/E	-0.2x	-3.5x	4.5x


Company Description

Incannex Healthcare, Inc. is a clinical-stage biopharmaceutical development company focused on developing innovative medicines for patients living with chronic diseases and significant unmet need. Incannex is advancing proprietary, synthetic first- and best-in-class cannabinoid and psychedelic-assisted therapeutics targeting sleep apnea, anxiety, and inflammatory diseases. Incannex's lead programs include IHL-42X for the treatment of obstructive sleep apnea (OSA), Psi-GAD in development to assess the use of psilocybin-assisted therapy for generalized anxiety disorder (GAD), and IHL-675A in Phase 2 trials for rheumatoid arthritis (RA). Each of these programs target conditions for which there are either no approved treatments, or the available treatments are inadequate.

INCANNEX HEALTHCARE INC. (NASDAQGM: IXHL)
Company Summary

IHL-42X Phase 2 Outcomes: Incannex continued to build the clinical and patient-reported evidence base for IHL-42X in obstructive sleep apnea (OSA), following full Phase 2 RePOSA data and exit-interview analyses. Both low- and high-dose IHL-42X achieved statistically significant reductions in Apnea-Hypopnoea Index (AHI) versus placebo, with maximum AHI reductions of up to 83% in the high-dose arm. Exit interviews showed 57.6% of participants reported perceived improvement in their OSA, and most of those described the change as meaningful to daily life. IHL-42X was well tolerated across both dose cohorts, reinforcing its potential for broad use.

IHL-42X Next Steps: After two successful Phase 2 studies, management used 4Q25 to pivot IHL-42X from pure data generation toward regulatory and late-stage planning. The Company is preparing for formal FDA interactions to define the registrational path, including Phase 3 design, primary and secondary endpoints, and potential expedited-review options. We expect IXHL to update the market after FDA discussions conclude and the forward development strategy is finalized, positioning IHL-42X for late-stage trials in 2026. IHL-42X has received FDA Fast Track designation, recognizing the serious nature of OSA and the significant unmet need for an approved oral pharmacotherapy, given current reliance on device-based treatments with poor adherence.

Financing: IXHL exited 2Q26 with a strong balance sheet, reporting \$68.9M in cash and equivalents. The Company generated \$71.7M in proceeds from share issuances while maintaining disciplined use of its ATM facility. Incannex also strengthened its capital structure by eliminating all outstanding Series A warrants, removing legacy dilution overhang, and authorizing a \$20M share repurchase program, under which 3.1M shares were repurchased during the period. Together, these actions reflect a well-capitalized position and proactive capital management strategy to support continued clinical advancement. We believe IXHL now has several years of cash runway with enough funding to support IHL-42X up to commercialization and potentially move PSX-001 through a potential phase 3.

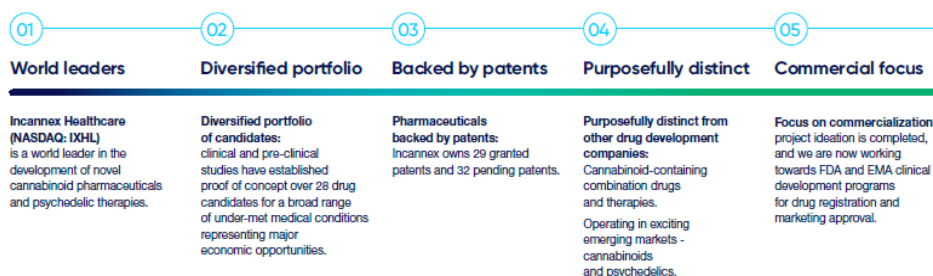
PSX-001 and IHL-675A Update: In CY25, Incannex reported positive Phase 2 results for PSX-001 (Psi-GAD), establishing it as a second major value driver. The randomized, placebo-controlled study showed a statistically significant and clinically meaningful reduction in HAM-A scores, with 44.1% of patients achieving $\geq 50\%$ response and 27% reaching remission. The Company is progressing PSX-001 into next-phase clinical and regulatory planning, including preparation for a registrational study and multi-jurisdiction development. Meanwhile, IHL-675A remains in Phase 2 development for rheumatoid arthritis and represents a complementary anti-inflammatory platform asset supporting long-term growth.

Valuation: We use a probability-adjusted Discounted Cash Flow Model when valuing IXHL. Our valuation model returns a valuation range of \$1.90 to \$2.24 with a midpoint of \$2.06 based on a discount rate range of 11.25% to 13.75% and a current risk adjustment range of 13% to 18%. Further details on our model can be found on page 5 of this report. We note that this model is highly levered to the out years due to the long term nature of IXHL's industry, leading to the potential for dramatic re-ratings as new information becomes available.

Business Overview

Incannex Healthcare, Inc. (“the Company”, “Incannex”, or “IXHL”) is a clinical-stage biopharmaceutical development company focused on developing innovative medicines for patients living with chronic diseases and significant unmet need. Incannex is advancing proprietary, synthetic first- and best-in-class cannabinoid and psychedelic-assisted therapeutics targeting sleep apnea, anxiety, and inflammatory diseases. Incannex’s lead programs include IHL-42X for the treatment of obstructive sleep apnea (OSA), PSX-001 in development to assess the use of psilocybin combined with psychological therapy for generalized anxiety disorder (GAD), and IHL-675A in Phase 2 trials for rheumatoid arthritis (RA). Each of these programs target conditions for which there are either no approved treatments, or the available treatments are inadequate. In 2023 IXHL re-domiciled from Australia to Delaware, with a continued listing on NASDAQ under the ticker symbol “IXHL”.

Exhibit 1: Company Overview



Source: Company Reports

Incannex has a diversified portfolio of 28 drug candidates backed by 29 granted patents and 32 pending patents that have established proof of concept for under-met conditions with significant addressable markets. Of the 28 candidates IXHL is focused on OSA, RA, and GAD. We are encouraged by the diversification in IXHL’s portfolio and note that this portfolio is further de-risked as IXHL is using the FDA’s 505(b)(2) pathway to accelerate the approval process for its OSA and RA treatments. This diversification combined with the Company’s focus on commercialization of its assets helps IXHL stand out compared to peers.

Exhibit 2: Asset Overview

Clinical Project	Addressable Market Opportunity (in US\$)	Stage of Development	Regulatory Stage of Development	Next Steps	Relevant Patents
1. Lead Candidates					
IHL-42X Obstructive Sleep Apnea	\$4.045 (\$1.5) in 2024 (a)	Phase 2/3 underway	Phase 2/3 trial completed	IND opening study	1x Pending Key claims deemed novel and inventive
IHL-475A Rheumatoid Arthritis	\$40.15 (\$1.5) in 2021 (b)	Phase 2 completed	FDA Pre-IND completed	Complete phase 2 CT	1x Pending Key claims deemed novel and inventive
Pre-GAD Generalized Anxiety Disorder	\$1.485 U.S. in 2023 (a)	Phase 1A	FDA IND submission	Complete phase 1C	Preclinical patents filed
2. Secondary Assets					
IHL-675A Inflammatory Bowel Disease	\$2.765 (\$1.5) in 2021 (b)	Pre-clinical completed	FDA Pre-IND completed	Commence phase 2 CT	1x Pending Key claims deemed novel and inventive
APR1-1601 Skin Vitiligo	\$0.15 (\$1.5) in 21 (b)	Phase 2 completed	Pre-IND drafting	Phase 1	1x Granted 1x Pending
APR1-1602 Stress Pericarditis	\$0.15 (\$1.5) in 21 (b)	Phase 1A completed	Pre-IND drafting	Phase 1	2x Granted
APR1-1603 Skin Psoriasis Dermatitis	\$1.15 (\$1.5) in 21 (b)	Phase 1A completed	Pre-IND drafting	Phase 1	1x Granted 1x Pending
CannQuit Addiction: Substance Smoking Cessation	\$47.765 (\$1.5) by 24, 17.2N, CAG21 (a)	Pre-clinical	Pre-regulatory	Phase 1	2x Granted
CannQuit O Addiction: Opioid Addiction	\$46.65 (\$1.5) in 21 (b)	Pre-clinical	Pre-regulatory	Phase 1	2x Granted

(a) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Irritable Bowel Syndrome / Crohn's Disease
(b) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in rheumatoid arthritis and psoriasis, when other evidence exists to support other patient costs
(c) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(d) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(e) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(f) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(g) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(h) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(i) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(j) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(k) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(l) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(m) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(n) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(o) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(p) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(q) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(r) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(s) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(t) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(u) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(v) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(w) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(x) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(y) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse
(z) Frost & Sullivan Market Report as commissioned by IXHL, Sept. 2021, market opportunity in Addictive Substance Abuse

Source: Company Reports

Incannex re-domiciled from Australia to Delaware in 2023 with a listing on the NASDAQ. We view the story as having potential for improved exposure leading to improved liquidity and a potential price re-rating. Currently the Company does not have revenues but does receive significant tax incentives from the Australian government for research and development activities which typically amounts to refundable tax offsets for R&D activities equal to approximately 43.5% of R&D activities in the year. Financing of company operations has historically been supported primarily through the sale of equity securities, option exercises, R&D tax incentives, and interest income. As of Sept. of 2025, IXHL held \$73.3M in cash and cash equivalents, and management believes current cash balances, together with anticipated cash flows and available financing arrangements, are sufficient to fund operating and capital needs for at least the next 12 months.

Assets

IHL-42X

IHL-42X is a novel treatment designed to treat people suffering from Obstructive Sleep Apnea (OSA) which is characterized by interrupted breathing while asleep. OSA is a highly prevalent condition where current treatments have poor patient compliance and no approved pharmacotherapies. What makes IHL-42X interesting is its unique combination of dronabinol and acetazolamide, addressing two different physiological aspects of OSA. Dronabinol binds to cannabinoid receptors, modulates signaling, and activates muscles that dilate the airway whereas acetazolamide induces metabolic acidosis which signals to the body that there is excess CO₂ in the blood, inducing the taking of a breath. Both of these compounds have been approved in the US for other treatments, leading to the potential reduced timeline to market.

Exhibit 3: IHL-42X Clinical Development Status



Source: Company Reports

Currently, IHL-42X has completed its Phase 2 trial with robust topline data in obstructive sleep apnoea, and Incannex is now prioritizing regulatory engagement and late-stage planning. The Company is preparing for formal interactions with the FDA to define the optimal U.S.-based pivotal program and potential expedited regulatory designations, with the goal of advancing toward a 505(b)(2) NDA pathway once the Phase 3 design and development strategy are finalized. Should IHL-42X receive approval, it would enter a significant addressable market, currently valued at approximately \$8.2 billion and primarily dominated by sleep apnea devices such as positive airway pressure (PAP) machines. Given the compliance challenges associated with existing device therapies, there is a considerable opportunity for pharmaceutical solutions like IHL-42X that offer effective, less intrusive treatment options.

Exhibit 4: IHL-42X Market Overview



Source: Company Reports

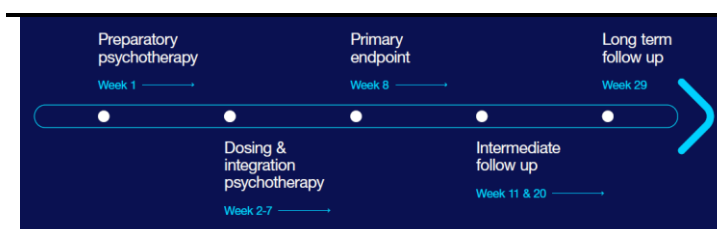
Topline results from the Phase 2 RePOSA trial are highly encouraging. Both the low- and high-dose IHL-42X arms achieved statistically significant reductions in percent change in Apnoea-Hypopnoea Index (AHI) versus placebo, with maximum AHI reductions of up to 83% for the high-dose group and up to 79% for the low-dose group. The study also demonstrated broad improvements across sleep-quality and fatigue instruments and objective polysomnography metrics, with no serious adverse events and a favorable tolerability profile.

Structured exit interviews showed that 57.6% of participants—rising to 78.6% in the low-dose arm—reported perceived improvement in their OSA, and 86.4% of those describing improvement considered the benefit meaningful to daily life, positioning IHL-42X well as it advances toward late-stage development.

PSX-001

PSX-001 is Incannex's psilocybin drug is designed for use with psychological therapy to treat people suffering from Generalized Anxiety Disorder (GAD) which is characterized by its diffuse, excessive, uncontrollable worry that is not restricted to any specific environmental circumstances. Treatment of GAD remains inadequate, with less than half of patients achieving remissions with currently accepted treatments. What makes Psi-GAD interesting is its use of psilocybin to facilitate access to fundamental causes of anxiety, and providing a remarkable opportunity for patients to make real and lasting changes via psychotherapy.

Exhibit 3: Psi-GAD2 Treatment Timeline



Source: Company Reports

Generalized Anxiety Disorder is a highly prevalent disorder, with an estimated 7 million people in the US and 1 million people in Australia having moderate to severe GAD. To study the effectiveness of PSX-001, the primary endpoint is change in HAM-A score from baseline to two weeks after the second dosing session. In the completed Australian TGA-regulated Phase 2 PsiGAD1 trial, PSX-001 achieved a mean 12.8-point reduction in HAM-A versus 3.6 points for placebo, with 44.1% of treated patients meeting a $\geq 50\%$ response threshold and 27% achieving remission ($\text{HAM-A} \leq 7$), more than four- and five-fold higher than placebo, respectively. These gains were supported by statistically significant improvements across GAD-7, SDS, PHQ-9, and PWI, with durable benefit over an 11-week follow-up and no serious adverse events, and Incannex is now planning a multi-jurisdiction Phase 2 PsiGAD2 study in approximately 94 patients across U.S. and U.K. sites to further characterize efficacy and durability across two treatment arms.

The Company has reported statistically significant and clinically meaningful topline results from the PsiGAD1 Phase 2 proof-of-concept study of PSX-001, demonstrating robust, durable anxiety reduction across multiple validated scales with an excellent safety profile. Building on this foundation, Incannex is preparing to initiate the PsiGAD2 Phase 2 trial, a multi-jurisdiction study enrolling roughly 94 patients at sites in the U.S. and U.K. under an open IND, while also refining formulation and exploring strategic partnerships to accelerate development and broaden global access.

Exhibit 4: Psi-GAD Clinical Development Status



Source: Company Reports

IHL-675A

IHL-675A is a novel treatment designed to treat people suffering from inflammation, which is a major contributing factor to rheumatoid arthritis, with many patients not responding to current drug treatments. IHL-675A targets two components of the inflammatory pathway by combining two anti-inflammatory drugs, CBD and hydroxychloroquine sulfate (HCQ). Incannex has demonstrated that IHL-675A reduced disease severity in an animal model of rheumatoid arthritis to a greater extent than either CBD or hydroxychloroquine sulfate alone. HCQ and CBD seem to work synergistically to inhibit production of inflammatory cytokines.

The addressable market for this rheumatoid arthritis treatment is estimated at \$60.1B. The Company recently completed patient dosing in a Phase 2 clinical trial involving approximately 128 subjects and expects to report top-line data in the second half of 2025, with plans to pursue a larger Phase 2 study in the U.S.

Exhibit 5: IHL-675A Clinical Development Status



Source: Company Reports

Additional Assets

Additional assets include cannabinoid chewables designed to treat addiction. Incannex holds multiple patents for chewable cannabinoid-based drug candidates that also contain nicotine or opioid agonists and/or antagonists. Opioid use disorder has an estimated addressable market of \$4.59B, and the nicotine chewing gum market was \$5.2B in 2020.

The Company is also working to use a combination of CBD and CBG to treat dermatological conditions caused by disorders of the immune system that include vitiligo, psoriasis and atopic dermatitis, otherwise known as eczema. There is no topical cannabinoid products that have achieved regulatory approval for any skin condition, giving the Company access to the \$1.2B Vitiligo market, the \$26.4B psoriasis market, and the \$11.8B atopic dermatitis market. Patents are pending for compositions and methods of use for treatment of these skin conditions with the next steps being Phase 2 clinical trials in Australia.

Risks

As with any investment, there are certain risks associated with Incannex's operations as well as with the surrounding economic and regulatory environments common to the pharmaceutical industry.

- The Company has no history of net income, dividends, or cash flow and there can be no assurance that the Company will be profitable going forward. In the case that the Company cannot create enough revenue to sustain on-going business activities, the Company's most likely source of financing will be through the sale of existing securities or high-cost borrowing.
- Currently the Company has enough funds to sustain it through the foreseeable future and does not pose a going concern risk. We do however recognize that the Company will most likely need to raise more funds to sustain its operations until it begins revenue generation. Should the Company be unable to raise the necessary funds this would create a going concern risk.
- The Company is subject to regulatory risk as pharmaceutical activities are subject to laws and regulations imposed by local and state government authorities. Any future changes in the laws, regulations, agreements, or judicial rulings could impact the Company's potential portability.
- Should the Company bring any or all of its assets to market, there is no guarantee that a profitable market will exist for those treatments.

VALUATION SUMMARY

We use a probability-adjusted Discounted Cash Flow Model when valuing IXHL. Our valuation model returns a valuation range of \$1.90 to \$2.24 with a midpoint of \$2.06 based on a discount rate range of 11.25% to 13.75% and a current risk adjustment range of 13% to 18%. Key assumptions in this valuation include the tax incentive rate remaining at 43.5%, a current total market size of approximately 89.8B, a total market size CAGR of 5% over the foreseeable future, and a steadily increasing market capture percentage. Uncertainties that would have a significant impact on this model would be variances in the time to market for any of the three leading drug candidates which would impact the risk rating, the capital needs of IXHL going forward which would impact the shares outstanding, and any changes to market capture due to a number of variables that would influence the Company's revenue potential. We note that this model is highly levered to the out years due to the long term nature of IXHL's industry, leading to the potential for dramatic re-ratings as new information becomes available. Currently we believe the Company will begin revenue generation as early as FY27, with operating profitability beginning in FY31.

BALANCE SHEET

IncanneX Healthcare Inc. Consolidated Balance Sheets (\$M) Fiscal Year End: June										
ASSETS	FY 2022	FY 2023	FY 2024	Q1 Sep-24	Q2 Dec-24	Q3 Mar-25	Q4 Jun-25	FY 2025	Q1 Sep-25	Q2 Dec-25
Cash and Cash Equivalents	37.5	22.1	5.9	3.6	2.1	6.7	15.0	15.0	73.3	68.9
Prepaid Expenses and Other Assets	0.4	0.9	0.5	0.5	0.4	0.4	0.8	0.8	0.5	0.7
R&D Tax Incentive Receivable	-	-	9.8	11.1	1.4	7.1	4.1	4.1	4.5	5.1
Assets pledged as security for short-term debt	-	-	-	-	6.6	1.4	-	-	-	-
Total Current Assets	37.9	23.0	16.2	15.2	10.5	15.6	20.0	20.0	78.3	74.7
Property, Plant, and Equipment, net	-	0.3	0.5	0.4	0.3	0.3	0.2	0.2	0.2	0.1
Operating Lease ROU Assets	-	0.5	0.4	0.4	0.3	0.3	0.3	0.3	0.2	0.2
Other assets	-	-	-	-	-	-	-	-	0.0	0.1
Total Assets	37.9	23.8	17.0	16.0	11.1	16.2	20.4	20.4	78.7	75.0
LIABILITIES AND SHAREHOLDERS' EQUITY										
Trade and Other Payable	2.0	1.7	0.6	1.6	0.8	1.1	6.1	6.1	1.3	1.3
Accrued Expenses	-	0.7	4.8	7.5	3.4	4.7	0.7	0.7	0.2	0.2
Operating Lease Liabilities, Current	-	0.1	0.2	0.2	0.2	0.2	0.2	0.2	0.1	0.1
Short-term debt	-	-	-	-	1.4	1.4	-	-	-	-
Total Current Liabilities	2.0	2.6	5.6	9.2	5.8	7.4	7.0	7.0	1.6	1.6
Operating Lease Liabilities, Non-Current	-	0.4	0.2	0.2	0.2	0.1	0.1	0.1	0.1	0.1
Long-term debt	-	-	-	-	2.4	-	-	-	-	-
Warrant liabilities	-	-	-	-	1.3	1.3	-	-	-	-
Convertible rights	-	-	-	-	0.5	-	-	-	-	-
Total Liabilities	2.0	3.0	5.8	9.5	10.1	8.8	7.1	7.1	1.7	1.6
Common Stock	-	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Preferred Stock	-	-	-	-	-	-	-	-	-	-
Additional Paid-In Capital	94.7	116.3	125.2	125.7	126.4	136.8	174.0	174.0	243.8	247.0
Accumulated Deficit	(58.8)	(92.2)	(110.7)	(116.1)	(122.0)	(126.0)	(157.6)	(157.6)	(164.0)	(170.5)
Foreign Currency Translation Reserve	-	(3.3)	(3.3)	(3.0)	(3.4)	(3.5)	(3.1)	(3.1)	(2.9)	(3.2)
Total Parent Net Equity	35.9	20.8	11.2	6.6	1.0	7.4	13.4	13.4	77.0	73.4
Total Liabilities and Shareholders' Equity	37.9	23.8	17.0	16.0	11.1	16.2	20.4	20.4	78.7	75.0
Liquidity										
Current Ratio	18.8x	9.0x	2.9x	1.6x	1.8x	2.1x	2.9x	2.9x	47.5x	48.2x
Quick Ratio	0.0x	0.7x	0.8x	0.8x	0.6x	0.5x	0.5x	0.5x	0.3x	0.3x
Working Capital	35.87	20.45	10.58	5.98	4.66	8.26	12.98	12.98	76.65	73.12

Source: Company Reports, Stonegate Capital Partners

INCOME STATEMENT

Incannex Healthcare Inc. Consolidated Statements of Income (in \$M, except per share amounts) Fiscal Year End: June																			
	FY 2021	FY 2022	FY 2023	FY 2024	Q1 Sep-24	Q2 Dec-24	Q3 Mar-25	Q4 Jun-25	FY 2025	Q1 Sep-25	Q2 Dec-25	Q3 E Mar-26	Q4 E Jun-26	FY 2026E	Q1 E Sep-26	Q2 E Dec-26	Q3 E Mar-27	Q4 E Jun-27	FY 2027E
Revenue	\$ -	\$ -	\$ -	\$ 0.0	\$ 0.1	\$ 0.0	\$ -	\$ -	\$ 0.1	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 10.0	\$ 30.0	\$ 40.0
Other Revenue	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Revenues	-	-	-	0.0	0.1	0.0	-	-	0.1	-	-	-	-	-	-	-	10.0	30.0	40.0
Research and Development Costs	5.4	9.4	6.3	12.9	2.9	1.4	2.7	3.7	10.7	1.1	2.3	2.3	2.3	8.0	0.9	0.9	0.9	0.9	3.6
Acquisition of In-Process R&D	-	-	35.3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
General and Administrative	10.3	12.0	8.0	17.2	3.4	3.6	2.3	3.8	13.1	5.7	4.7	4.7	4.7	19.8	4.2	4.2	4.2	4.2	16.6
Total Operating Expenses	15.7	21.4	49.7	30.1	6.3	5.0	5.0	7.5	23.9	6.8	7.0	7.0	7.0	27.8	5.1	5.1	5.1	5.1	20.2
Operating Income	(15.7)	(21.4)	(49.7)	(30.0)	(6.3)	(5.0)	(5.0)	(7.5)	(23.8)	(6.8)	(7.0)	(7.0)	(7.0)	(27.8)	(5.1)	(5.1)	5.0	25.0	19.8
R&D Tax Incentive	0.8	1.0	0.7	11.4	0.8	1.0	0.4	(0.4)	1.8	0.4	0.5	0.5	0.5	1.8	0.2	0.2	0.2	0.2	0.8
Foreign Exchange Expense	-	-	(0.1)	(0.0)	(0.0)	(0.3)	0.0	0.0	(0.3)	(0.0)	(0.0)	(0.0)	(0.0)	(0.1)	(0.0)	(0.0)	(0.0)	(0.0)	(0.1)
Interest Income	0.0	0.4	0.2	0.2	0.0	0.0	0.0	(0.4)	(0.3)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Interest expense	-	-	-	-	-	(0.2)	(0.1)	0.4	0.1	-	-	-	-	-	-	-	-	-	-
Change in FV of convertible rights	-	-	-	-	-	(0.2)	-	0.5	0.3	-	-	-	-	-	-	-	-	-	-
Change in FV of warrant liabilities	-	-	-	-	-	(0.1)	1.8	(23.6)	(21.9)	-	-	-	-	-	-	-	-	-	-
Warrant issuance costs	-	-	-	-	-	-	-	(0.1)	(0.1)	-	-	-	-	-	-	-	-	-	-
Loss on extinguishment	-	-	-	-	-	-	-	(1.5)	(1.5)	-	-	-	-	-	-	-	-	-	-
ELOC commitment fee	-	-	-	-	-	-	-	(1.1)	(1.1)	-	-	-	-	-	-	-	-	-	-
Other Income expense	-	-	-	-	-	(1.1)	(1.1)	2.2	-	0.0	0.0	-	-	0.0	-	-	-	-	-
Profit Before Taxes	(14.9)	(20.0)	(48.8)	(18.4)	(5.4)	(5.9)	(4.0)	(31.6)	(46.9)	(6.4)	(6.5)	(6.5)	(6.5)	(26.0)	(4.9)	(4.9)	5.1	25.1	20.5
Provision for Income Tax	-	-	-	0.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Net Income	(14.9)	(20.0)	(48.8)	(18.5)	(5.4)	(5.9)	(4.0)	(31.6)	(46.9)	(6.4)	(6.5)	(6.5)	(6.5)	(26.0)	(4.9)	(4.9)	5.1	25.1	20.5
Basic EPS	\$ (1.25)	\$ (1.30)	\$ (3.32)	\$ (1.15)	\$ (0.29)	\$ (0.33)	\$ (0.20)	\$ (1.89)	\$ (1.37)	\$ (0.02)	\$ (0.02)	\$ (0.02)	\$ (0.02)	\$ (0.04)	\$ (0.01)	\$ (0.01)	\$ 0.01	\$ 0.04	\$ 0.03
Diluted EPS	\$ (1.25)	\$ (1.30)	\$ (3.32)	\$ (1.15)	\$ (0.29)	\$ (0.33)	\$ (0.20)	\$ (1.89)	\$ (1.37)	\$ (0.02)	\$ (0.02)	\$ (0.02)	\$ (0.02)	\$ (0.04)	\$ (0.01)	\$ (0.01)	\$ 0.01	\$ 0.04	\$ 0.03
WTD Shares Out - Basic	11.9	15.4	15.4	16.2	17.6	17.6	19.6	16.7	34.5	310.3	349.5	349.5	349.5	606.0	606.6	606.6	606.6	606.6	606.6
WTD Shares Out - Diluted	11.9	15.4	15.4	16.2	17.6	17.6	19.6	16.7	34.5	310.3	349.5	349.5	349.5	606.0	606.6	606.6	606.6	606.6	606.6
Growth Rate Y/Y																			
Total cost of revenues		36.1%	132.6%	-39.5%	29.3%	-37.2%	-32.5%	-22.9%	-20.6%	7.4%	39.5%	39.8%	-7.1%	16.4%	-25.7%	-27.8%	-27.8%	-27.8%	-27.3%
Operating Income		36.1%	132.6%	-39.5%	27.8%	-37.3%	-32.5%	-22.8%	-20.8%	8.6%	39.8%	39.8%	-7.1%	16.8%	-25.7%	-27.8%	-170.8%	-456.7%	-171.3%

Source: Company Reports, Stonegate Capital Partners estimates

IMPORTANT DISCLOSURES AND DISCLAIMER

- (a) The research analyst and/or a member of the analyst's household do not have a financial interest in the debt or equity securities of the subject company.
- (b) The research analyst responsible for the preparation of this report has not received compensation that is based upon Stonegate's investment banking revenues.
- (c) Stonegate or any affiliate have not managed or co-managed a public offering of securities for the subject company in the last twelve months, received investment banking compensation from the subject company in the last 12 months, nor expects or receive or intends or seek compensation for investment banking services from the subject company in the next three months.
- (d) Stonegate's equity affiliate, Stonegate Capital Partners, "SCP" has a contractual agreement with the subject company to provide research services, investor relations support, and investor outreach. SCP receives a monthly retainer for these non-investment banking services.
- (e) Stonegate or its affiliates do not beneficially own 1% or more of any class of common equity securities of the subject company.
- (f) Stonegate does not make a market in the subject company.
- (g) The research analyst has not received any compensation from the subject company in the previous 12 months.
- (h) Stonegate, the research analyst, or associated person of Stonegate with the ability to influence the content of the research report knows or has reason to know of any material conflicts of interest at the time of publication or distribution of the research report.
- (i) No employee of Stonegate has a position as an officer or director of the subject company.

Ratings - Stonegate does not provide ratings for the covered companies.

Distribution of Ratings - Stonegate does not provide ratings for covered companies.

Price Chart - Stonegate does not have, nor has previously had, a rating for its covered companies.

Price Targets - Stonegate does not provide price targets for its covered companies. However, Stonegate does provide valuation analysis.

Regulation Analyst Certification:

I, Dave Storms, CFA, hereby certify that all views expressed in this report accurately reflect my personal views about the subject company or companies and its or their securities. I also certify that no part of my compensation was, is, or will be directly or indirectly related to the specific recommendations or views expressed in this report.

For Additional Information Contact:

Stonegate Capital Partners, Inc.

Dave Storms, CFA

Dave@stonegateinc.com

214-987-4121

Please note that this report was originally prepared and issued by Stonegate for distribution to their market professional and institutional investor customers. Recipients who are not market professional or institutional investor customers of Stonegate should seek the advice of their independent financial advisor prior to taking any investment decision based on this report or for any necessary explanation of its contents. The information contained herein is based on sources which we believe to be reliable but is not necessarily complete and its accuracy cannot be guaranteed. Because the objectives of individual clients may vary, this report is not to be construed as an offer or the solicitation of an offer to sell or buy the securities herein mentioned. This report is the independent work of Stonegate Capital Partners and is not to be construed as having been issued by, or in any way endorsed or guaranteed by, any issuing companies of the securities mentioned herein. The firm and/or its employees and/or its individual shareholders and/or members of their families and/or its managed funds may have positions or warrants in the securities mentioned and, before or after your receipt of this report, may make or recommend purchases and/or sales for their own accounts or for the accounts of other customers of the firm from time to time in the open market or otherwise. While we endeavor to update the information contained herein on a reasonable basis, there may be regulatory, compliance, or other reasons that prevent us from doing so. The opinions or information expressed are believed to be accurate as of the date of this report; no subsequent publication or distribution of this report shall mean or imply that any such opinions or information remains current at any time after the date of this report. All opinions are subject to change without notice, and we do not undertake to advise you of any such changes. Reproduction or redistribution of this report without the expressed written consent of Stonegate Capital Partners is prohibited. Additional information on any securities mentioned is available on request.